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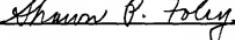
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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>		Attorney Docket No.	EGYPSA 3.0-004
		First Inventor	Pierre Legrain
		Title	PROTEIN-PROTEIN INTERACTIONS, etc.
		Express Mail Label No.	EV064373711US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

<b>APPLICATION ELEMENTS</b>		<b>ADDRESS TO:</b>	
See MPEP chapter 600 concerning utility patent application contents		Box Patent Application Commissioner for Patents Washington, DC 20231	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Shows an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages <b>140</b>] (preferred arrangement set forth below)            - Descriptive title of the invention            - Brief Description of the Related Art            - Statement Regarding Fed Sponsored R &amp; D            - Reference to sequence listing, a table,            or a computer program listing appendix            - Base broad claim(s)            - Brief Summary of the Invention            - Brief Description of the Drawings (if filed)            - Detailed Description            - Claim(s)            - Abstract of the Disclosure</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)            a. <input type="checkbox"/> Computer Readable Form (CRF)            b. Specification Sequence Listing on            L. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or <input type="checkbox"/> paper            c. <input type="checkbox"/> Statements verifying identity of above copies</p>	
<p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>16</b>]</p> <p>5. Oath or Declaration [Total Pages <b>2</b>]            a. <input checked="" type="checkbox"/> Unexecuted (original or copy)            b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))            (for continuation/divisional with Box 18 completed)</p> <p><input type="checkbox"/> DELETION OF INVENTOR(S)            Signed statement attached deleting            inventor(s) named in the prior application,            see 37 CFR 1.63(d)(2) and 1.33(b)</p>		<p>9. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS) (37 CFR 1.149) <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>15. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent</p> <p>16. <input type="checkbox"/> Other _____</p> <p>17. <input type="checkbox"/> Other _____</p>	
<p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.67</p> <p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76  <input type="checkbox"/> Continuation    <input type="checkbox"/> Divisional    <input type="checkbox"/> Continuation-In-part (CIP) or prior application No.: _____</p> <p>Prior application information: Examiner _____ Group / Art Unit _____</p> <p>For CONTINUATION or DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>			

19. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label 		or <input type="checkbox"/> Correspondence address below 000530	
Name			
Address			
City	State	Zip Code	Fax
Country	Telephone		

Name (Print/Type)	Shawn P. Foley	Registration No. (Attorney/Agent)	33,071
Signature		Date	January 11, 2002

Express Mail Label No. EV064373711US Dated: January 11, 2002

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# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

 Application claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 622.00)

## Complete if Known

Application Number	Not Yet Assigned
Filing Date	Herewith
First Named Inventor	Pierre Legrain
Examiner Name	Not Yet Assigned
Group Art Unit	N/A
Attorney Docket No.	EGYPSA 3.0-004

## METHOD OF PAYMENT (check all that apply)

 Check    Credit Card    Money Order    Other    None Deposit Account

Deposit Account Number

12-1095

Deposit Account Name  
Lerner, David, Littenberg,  
Krumholz & Mentlik, LLP

The Commissioner is hereby authorized to: (check all that apply)

 Charge fees indicated below    Credit any overpayments Charge any additional fee(s) during the pendency of this application Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101 740	201 370	Utility filing fee	370.00
106 330	206 165	Design filing fee	
107 510	207 255	Plant filing fee	
108 740	208 370	Reissue filing fee	
114 160	214 80	Provisional filing fee	
SUBTOTAL (1) (\$)		370.00	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Total Claims	-20** =	2	= 0.00
Independent Claims	-3** =	6	= 252.00
Multiple Dependent			
SUBTOTAL (2) (\$)		252.00	
*Reduced by Basic Filing Fee Paid			
SUBTOTAL (3) (\$)		0.00	

\*\*or number previously paid, if greater. For Reissues, see above

## SUBMITTED BY

Name (Print/Type)	Shawn P. Foley	Registration No (Attorney/Agent)	33,071	Telephone	(908) 518-6346
Signature	<i>Shawn P. Foley</i>			Date	January 11, 2002

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